ŻĮ	
i.	
ā	
æ	
ples.	

lease type a plus sign (+) inside this box  Under the Paperwork Reduction Act	,	Patent and Trademark	Office; U.S. I	rough 9/30/00. OMB	OMMERCE				
a valid OMB control number.		Attorney Docket	Number	353-08					
DECLARATION FOR UDESIGN	JTILITY OR			Robinson					
PATENT APPLICATION	ATION	COMPLETE IF KNOWN							
(37 CFR 1.63		Application Numb	Application Number						
	☐ Declaration Submitted after Initial	Filing Date							
Submitted OR Subm		Group Art Unit							
	(surcharge FR 1.16 (e)) red)	Examiner Name							
My residence, post office address, and citizenship are as stated below next to my name.  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled.  SPUTTER DEPOSITION USING MULTIPLE TARGETS  the specification of which  (Title of the Invention)  is attached hereto  OR  was filed on (MM/DD/YYYY)  and was amended on (MM/DD/YYYY)  (if applicable).  I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy YES	/ Attached? NO				
				0000					

Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Filing Date (MM/DD/YYYY)

Application Number(s)

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (12-97)
us sign (+) inside this box 

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION** — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filling date of the prior application and the national or PCT international filing date of this application.												
U.S. Parent Application or PCT Parent Number					Parent Filing Date (MM/DD/YYYY)				Parent Patent Number (if applicable)			
09/471,662					12/23/1999							
09/07	8,72	7			05/14/1998							
Additional	U.S. or PO	CT international applicati	ion numbers are t	listed on	a suppl	emental p	riority data	sheet PT	O/SB/0	2B attached he	ereto.	
		ereby appoint the following			s) to pro	secute th	is application	n and to	transac			
and Trademark	Office cor		Customer Numbe OR	эг				<b>→</b>	•	Place Custo. Number Bar	1 2	
			CK Registered practit	tioner(s)	name/r	egistration	n number list	ted belov	<u> </u>	Label her	1 6	
	Name		Registra				Nam	e			tration nber	
	Hunn		Numb	er						13341	iibei	
Dean P	. Ed	lmundson	25723		1						1	
					- 1						-	
			l									
Additional r	egistered	practitioner(s) named or	n supplemental R	legistere	d Practi	tioner Info	ormation she	et PTO/S	SB/02C	attached here	to.	
Direct all corre	esponde	nce to: Custom	ner Number					당 Co	مام 	ndence addr	see helow	
			Code Label						liespo	Illucitus audi	622 001011	
Name	E	ean P. Edr	nundson									
Address	F	0.0. Box 71	10		<del></del>	<del></del>		<del> ,</del>				
Address				<u>-</u>								
City	Wir	ndsor	State CO ZIP 8				80	0550				
Country	USA	7	Telephone	(97	70)2	222-0	)446	Fax (970) 353-436			1361	
believed to be punishable by	true; and fine or in	I statements made here I further that these state oprisonment, or both, un issued thereon.	ements were ma	ide with	the kno	wiedge th	hat willful fai	se state	ments :	and the like so	made are	
Name of So	ole or F	First Inventor:				A petition	has been	filed for	this u	nsigned inve	ntor	
Gi	ven Nan	ne (first and middle [it	f anyl)		$\mathbf{I}_{-}$	Family Name or Surname						
	mond	S.,)		, /	R	Robin	ıson					
Inventor's Signature		Raymond S. Rob				rinson Date					/3JUNC	
Residence: (	Residence: City Ft. Collins State CO			20	Country USA Citizenship US						US	
Post Office Address 4504 Idlevale Drive												
Post Office A	ddress				<del></del>					· · · ·		
City		Ft.Collins	. CO	ZIF	, 8	0526	;	Cou	ntry	USA		
Additional	invento	rs are being named o	on the 1 sun	nlemen	tal Ado	litional Ir	nventor(s)	shoot/s)	PTO/	SRIN2A attac	had haret	

## **DECLARATION**

## **ADDITIONAL INVENTOR(S)** Supplemental Sheet Page \_\_\_\_ of \_\_\_\_

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any])					Family Name or Sumame					
Viacheslav V.					Zhurin					
Inventor's Signature	Vracheslav	heslav V. Z				mun,				6-13-01
Residence: City	Ft. Collins	State	СО	c	Country	USA		Citizens	nip R	ussia
Post Office Address	548 Charrington Court									
Post Office Address										
City	Ft.Collins	State	СО		ZIP	80525	Countr	y US	A	
Name of Additional Joint Inventor, if any:										
Given Na	me (first and middle [if any])					Family Nar	ne or	Surname		
James R	•			1	Kahn					
Inventor's Signature	James X.	Ka	de				Dar	te	6/13/01	
Residence: City	Et. Collins	State	State CO		Country USA			Citizenship		US
Post Office Address	2612 Belgian	Cou	rt	•						
Post Office Address										
City	Ft. Collins	State	State CO		ZIP	80526 <sub>Coun</sub>		ntry USA		
Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor										
Given Na	me (first and middle [if any]	)				Family Nar	ne or	Sumame		
Harold 1	R. 1		į	K	aufm	an				
Inventor's Signature	Harold R Han				Lugar				Date 6-13-0)	
Residence: City	LaPorte	2 State	C		Country USA		Citizenship US		US	
Post Office Address	5920 Obenchain Road									
Post Office Address	LaPorte, Colorado 80524									
City	LaPorte	State	СО		ZIP	80524 co		Country	ountry USA	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

ju. į41